Queen Victoria Hospital
NHS Foundation Trust

Suppliers & Commercial Representatives Policy & Procedure

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RATIFYING COMMITTEE	Executive Leadership Team
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RELATED POLICIES	• Management and Control of Contractors Policy • Purchase and Management of Reusable Medical Devices Policy & Procedure • Procurement Policy • Contract Management Policy • Standards of Business Conduct and Behaviour Policy • Counter Fraud policy • Policy for the Advertising and Promotion of Medicines
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EQUALITY and HUMAN RIGHTS IMPACT ANALYSIS	230525-1
CONSULTATION	Counter Fraud Chief Pharmacist Medical Devices Safety Officer
THIS DOCUMENT REPLACES	Suppliers & Commercial Representatives Policy & Procedure 2021 - CP.2029.2
This document is available in alternative formats upon request, such as large print, electronically or community languages.	

Document History and Control:

Version	Date Ratified	Brief summary of significant changes/ amendments	Author/ contributor
2	**June 2025**	Chief Pharmacist to be informed of any dealings with drug companies including any sponsorship, hospitality or gifts. Leaflets and posters relating to medicines must be approved by Chief Pharmacist and or/ Medicines Management Optimisation and Governance Group (MMOGG). No samples accepted by prescribers and not used on patients. Approval required by MMOGG	**Judy Busby (Chief Pharmacist)**
3	**June 2024**	Review by Counter fraud and revisions made	**Matt Wilson (rsm)** **Jade Williamson (rsm)**

Policy Summary / Key Information

- This policy places the relationship between the Trust and its suppliers on a sound and professional basis in accordance with Best Practice and to provide suppliers with guidelines on how they are expected to behave throughout the supply chain.

- Supplier representatives will NOT be seen by Trust staff without a prior appointment.

- When on site, all representatives are expected to comply with the Health and Safety at Work Act, as well as all Trust policies, procedures or guidance as in force at the time.

- All supplier representatives visiting clinical areas including Theatres must be registered on the MIA system and wear the badge at all times on site.

- All supplier representative must comply with latest UK Legislation (The Medical Devices Regulations 2002).

- The Chief Pharmacist must be informed of any training or meetings sponsored by Pharmaceutical Companies or their representative.

- It is an offence for employees to accept any gifts, hospitality, rewards or consideration as an inducement to do or refraining from doing, anything in their official capacity; or show favour or disfavour to any person / company. Where there is a suspicion of bribery or an inducement made, this should be reported to the Local Counter Fraud Specialist (LCFS).

- Supplier representatives must not expect to enter into any agreements in relation to the trial of products/pharmaceuticals without Trust approval via the Procurement Department/Chief Pharmacist. No products equipment or pharmaceuticals can be trialled until the relevant documentation and authorisation is completed.

Contents

1. Introduction

1.1. The Trust appreciates the role that suppliers play in assisting health practitioners to provide safe, effective and economical products and services to the patients in their care and other staff working within the wider health economy in the delivery of their duties to patients.

1.2. The aim of this policy and accompanying procedure is to put the relationship between the Trust and its suppliers on a sound and professional basis in accordance with best practice and to provide suppliers (and their commercial representatives) with guidelines on how they are expected to behave throughout the supply chain. It also sets out the behaviour the Trust expects from all staff to safeguard patients from the inappropriate use of commercially supplied medicines and equipment, prevent any allegations of improper or inappropriate relationships, and to support staff in adopting a consistent approach when dealing with supplier visits.

2. Definitions:

2.1. Supplier representatives refers to an individual employed by a Company to promote the sale (and prescribing) or perform services/works in connection with drugs, dressings, medical equipment, medical devices, and clinical consumables within healthcare practice.

2.2. ABHI refers to the Association of British HealthTech Industries.

2.3. ABPI refers to the Association of the British Pharmaceutical Industry.

2.4. BTEC refers to the Business and Technology Education Council.

2.5. MIA refers to the Medical Industry Accreditation Scheme. This scheme provides assurance to healthcare organisations that persons from the industry are properly trained for attendance in these areas. The training courses that make up the scheme have been fully accredited by established bodies including the Association of Perioperative Practice, Royal College of Nursing and BTEC.

3. Scope

3.1. This policy applies to all employees of the Trust including the Non-Executive Directors, temporary employees, locums and contracted staff and should be read in conjunction with the Policy for the Advertising and Promotion of Medicines.

3.2. It covers all suppliers and commercial representatives with the exception of contractors/external construction & engineering consultants for estates maintenance work and new capital projects. These fall within the scope of the Management and control of contractor's policy.

4. Duties

4.1. Duties within the Organisation

4.1.1. Chief Executive Officer and Trust Board – have ultimate accountability for actions and inactions in relation to this policy.

4.1.2. Managers – Line Managers have responsibility for ensuring that this policy is implemented within their areas of responsibility.

4.1.3. Head of Procurement – is responsible for monitoring and reviewing this policy.

4.1.4. Medical Devices Lead – is responsible for monitoring breaches to this policy by external supplier representatives in relation to medical devices and to report such breaches to the Head of Procurement.

4.1.5. Chief Pharmacist – in relation to Medicines, Pharmacy and prescribable medical devices, is responsible for monitoring and reviewing this policy.

4.1.6. Committees and Groups with Overarching Responsibilities:

4.1.6.1. Finance and Performance Committee

5. Standards & Practice

5.1. All supplier representatives will not be seen by Trust staff without a prior appointment. Representatives should not enter any non-clinical or clinical areas, including the wards, outpatients, theatres, and pharmacy without prior arrangement with the Trust. Where Trust staff have contact with suppliers, managers should identify a limited number of Trust staff who are designated for this purpose.

5.2. Appointments should be arranged to be held during normal working hours – between 08.30 hrs and 16.30 hrs Monday to Friday.

5.3. 'Cold calling' is an inefficient use of staff and suppliers' time and is not permitted.

5.4. Bleep and mobile phone numbers should not be given to representatives unless permission to do so has been given expressly by the member of staff concerned. Particular care should always be taken with regard to the security of patient and commercially sensitive information and in doing so staff should always adhere to the respective Trust policies.

5.5. When on site, all representatives are expected to comply with the Health and Safety at Work Act, as well as all Trust policies, procedures or guidance as in force at the time. In the event of fire or major incident, all supplier representatives must comply with any instruction given to them by an

authorised member of staff.

5.6. When visiting theatres, managers should ensure that the supplier representative is aware of the procedures surrounding sharps injuries and that any such injuries should be reported using the Trust Incident Reporting and Investigation Policy.

5.7. Supplier representatives should not be left unaccompanied in working areas. If direct patient contact is required, patient consent MUST firstly be obtained and documented, to ensure that the clinician involved has confirmed this with the patient.

5.8. Supplier representatives cannot be present at multi-disciplinary meetings whilst patient details are being discussed. If supplier representative input is required, this must be confined to the relevant part of the meeting.

6. Medical Industry Accredited

6.1. All supplier representatives visiting the Trust must be registered on the MIA system. The MIA allows members of the medical technology industry to apply for an identification card which demonstrates to the Trust that they have completed an accredited training course which qualifies them to be present in either the theatre of acute care environments.

6.2. All supplier representatives must pre-register their visit through the MIA website www.miaweb.co.uk otherwise, they will not be permitted to visit the Trust.

6.3. Upon arrival, the staff member with whom an appointment is made or designated deputy, must log into the MIA website Healthcare Login and confirm their arrival. Training for this can be provided if you contact the Procurement department.

6.4. All supplier representatives must wear an MIA identification badge at all times whilst on Trust premises. Any representative not showing an MIA identification should be challenged and asked to produce evidence as to their identity and reported to the Head of Procurement.

7. Subjects for Discussion

7.1. Discussions with suppliers should be confined to obtaining information on product/service suitability. All issues connected with pricing or contractual terms should be referred to the Head of Procurement or for medicines / medicinal products, the Chief Pharmacist.

7.2. All staff should ensure that suppliers are not given any guarantees as to future contracts as a verbal acceptance of a suppliers' offer could be deemed legally binding as acceptance of an offer irrespective of whether the offer is in writing or not. Any documentation that suppliers propose for signing should be

referred to the Procurement Department for assessment prior to being signed.

8. Promotional Activity

8.1. It is recognised that, in addition to providing information to health practitioners, the prime function of representatives is to promote and sell their products and services. This function should be carried out in a proper and ethical manner and not contravene Trust, NHS or government policies.

8.2. Representatives should be well informed about the products they are promoting. In addition, standard technical, and, where appropriate, clinical data information should be available on product effectiveness. Current contracted pricing should not be disclosed, or price comparison discussed with a supplier as this may adversely influence any future tendering exercise and breach confidentiality.

8.3. Where teaching and/or promotional activity is planned, representatives must advise the Department Manager. The meeting should also be recorded on the Medical Industry Accreditation system (Theatre reps only). The intent of the meeting must not contravene existing Trust policies.

8.4. The Chief Pharmacist must be informed of any training or meetings sponsored by Pharmaceutical Companies or their representative. It may be necessary for them to be declared at local Area Prescribing Committees (or equivalent). See Policy for the Advertising and Promotion of Medicines.

8.5. Leaflets and posters produced by suppliers must not be distributed or displayed in clinical areas unless approved the by ward or departmental manager for that area. Any related to medicines must also be approved by the Chief Pharmacist and /or Medicines Management, Optimisation and Governance Group (MMOGG)

9. Code of Ethics

9.1. For the purposes of this policy, commercial sponsorship is defined as including: NHS funding from an external, non-charitable, source including funding or all or part of the costs of NHS research, staff, training, pharmaceuticals, equipment, meeting rooms, or any cost associated with meetings, meals, gifts, hospitality, hotel and transport costs (including trips abroad), or the provision of free services (speakers), building or premises.

9.2. The staff of the Trust are subject to standards of conduct in line with national guidance and staff should be aware of the Standards of Business Conduct for NHS Staff, as well as the Trust's Standards of Business Conduct policy.

9.3. All offers of hospitality or gifts made to staff must be recorded in the appropriate register and the relevant permission must be obtained in advance in relation to the acceptance of any hospitality or gift with the exception of items with a nominal finance value of £6 or less (pens, calendars, diaries, etc). If in

any doubt, staff must seek advice from the Procurement Department. See Standards of Business Conduct and Behaviour Policy.

9.4. The Chief Pharmacist must be informed of hospitality or gifts from Pharmaceutical Companies or their representatives. It may be necessary for them to be declared at local Area Prescribing Committees (or equivalent). See Policy for the Advertising and Promotion of Medicines.

9.5. Suppliers are not allowed to make any attempt to influence business decision making by offering hospitality to staff. The frequency and scale of any hospitality accepted will be managed openly by the Trust.

9.6. If material gifts or hospitality are accepted, and business is subsequently awarded to the supplier in question, then the individuals who are in receipt of the said gifts and hospitality should be aware that they may be in breach of the Standards of Business Conduct, but also open to allegations of corruption under the Local Counter Fraud Policy and Bribery Act 2010.

9.7. Any travel arrangements for conferences or for viewing equipment and services should be paid for by the Trust unless the Chief Finance Officer gives written approval for the supplier to take responsibility for travel arrangements or travel costs.

9.8. Commercial sponsorship relating to conferences or courses is only acceptable if the attendance of the Trust's staff forms part of an educational/training course approved by an accountable manager of the Trust, or is with the prior written authorisation of the business Manager.

9.9. It is an offence for employees corruptly to accept any gifts or consideration as an inducement or rewards to doing or refraining from doing, anything in their office capacity; or showing favour or disfavour to any person in their official capacity. Suspicions of bribery should be reported to the Trust's Local Counter Fraud Specialist (LCFS). All allegations of bribery will be investigated by the Trust's LCFS.

9.10. Payment of expenses by suppliers must not be undertaken whilst a tender exercise is being considered or undertaken unless specifically agreed by the Chief Finance Officer.

9.11. It is an offence for employees to accept any gifts, hospitality, rewards or consideration as an inducement to do or refraining from doing, anything in their official capacity; or show favour or disfavour to any person / company. Where there is a suspicion of bribery or an inducement made, this should be reported to the Local Counter Fraud Specialist (LCFS), 01273 591818.

10. Infection Prevention and Control

10.1. All personnel who visit and any equipment brought into the Trust has the potential to introduce infection and the Trust requires that all sales

representatives respect the appropriate infection control protocols and procedures when visiting the Trust.

10.2. It is the responsibility of the supplier representative to ensure that any equipment is sanitised according in line with the decontamination requirements and manufacturer's guidelines, where indicated.

10.3. All staff must be aware that the Trust will require a decontamination certificate as proof that a decontamination procedure was performed, prior to a piece of equipment being brought into the Trust for use.

11. Product Trials, Evaluations, Studies and Research Projects

11.1. Supplier representatives must not expect to enter into any agreements in relation to the trial of products without Trust approval via the Procurement Department. No products or equipment can be trialled until the relevant documentation and authorisation is completed.

11.2. Medical samples must only be left with the Senior Nurse/Manager on duty or a representative of the Procurement Department.

11.3. Samples cannot be accepted by prescribers in relation to the Trust business and must not be used on Trust patients. This includes medicines and prescribable medical devices.

11.4. Samples cannot be accepted from supplier representatives engaging with the Trust by any staff for non-Trust business. Any assistance from representatives of companies engaged in business with the Trust for staff members' outside interests may conflict with their Trust decision making abilities.

11.5. No medicine should be used until it has approval by the Medicines Management, Optimisation and Governance Group.

11.6. Electro-Medical equipment must be dealt with in line with the "Purchase and Management of Re-usable Medical Devices Policy and Procedure".

11.7. All trials of Medical Devices must be carried out under the control and authorisation of the Medical Device Co-ordinator in the relevant specialty or department.

11.8. Any equipment being trialled on patients must have the necessary informed consent approval and Medical Devices Group approval where appropriate.

12. Training and Awareness

12.1. This Policy will be published on the Trust's intranet site (Qnet) and will be highlighted through the Trust's electronic newsletter 'Connect'.

12.2. This policy will also be made available to all representatives and their organisations registering with MIA to visit our site.

12.3. MIA posters are up around the Trust to remind staff and representatives of the procedure.

13. Equality

13.1. This policy and protocol has been equality impact assessed in accordance with the Trust's impact assessment toolkit. Completed assessments are available upon request from qvh.edra@nhs.net.

14. Freedom of Information

14.1. Any information that belongs to the Trust may be subject to disclosure under the Freedom of Information Act 2000. This act allows anyone, anywhere to ask for information held by the Trust to be disclosed (subject to limited exemptions). Further information is available in the Freedom of Information Act Trust Procedure which can be viewed on the Trust Intranet.

15. Records Management

15.1. Records are created or received in the conduct of the business activities of the Trust and provide evidence and information about these activities. All records are also corporate assets as they hold the corporate knowledge about the Trust. The Trust has a Records Management Policy for dealing with records management. Compliance with and the application of this policy will ensure that the Trust's records are complete, accurate and provide evidence of and information about the Trust's activities for as long as is required.

16. Review

16.1. This policy will be reviewed in 3 years' time. Earlier review may be required in response to exceptional circumstances, organisational change or relevant changes in legislation or guidance.

17. Discipline

17.1. Staff who are aware about actual breaches of this policy, or who are concerned that there has been, or may be, a breach, should report these

concerns to the Freedom to Speak up Guardian (FTSU) or via the Local Counter Fraud Service Specialist (LCFS), in line with current processes. Contact details can be found in the Raising Concerns (Whistleblowing Policy) and the Counter Fraud Policy

18. Monitoring Compliance with this Policy

Activity being monitored	Methodology to be used for monitoring	Responsibility for monitoring	Frequency of monitoring and reporting
Use of the MIA system	System Reporting	Head of Procurement	Annual

19. References

The Bribery act 2010
Medical Industry Accreditation Service www.miaweb.co.uk